

DES/HXC/jam
February 2, 2011



PATENT APPLICATION
DOCKET NO. 3518.1015-000

TFW

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Thomas M. DiMauro, Mohamed Attawia, Hassan Serhan, Martin A. Reynolds, Melissa Grace, Sudhakar Kadiyala, David Urbahns, Scott Bruder, Gregory Collins, Laura J. Brown, Jeff Geesin, Pamela L. Plouhar, Catherine Smith and John Siekierka

Application No.: 10/630,227

Group: 1647

Filed: July 30, 2003

Examiner: Shafer, Shulamith H.

Confirmation No.: 8291

For: Trans-Capsular Administration Of High Specificity Cytokine Inhibitors Into Orthopedic Joints

CERTIFICATE OF MAILING OR TRANSMISSION	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or is being facsimile transmitted to the United States Patent and Trademark Office on:	
<u>2/02/11</u> Date	<u>[Signature]</u> Signature
<u>Hak J. Chang</u> Typed or printed name of person signing certificate	

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment for filing in the above-identified application.

- ☐ Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a Small Entity Statement previously submitted.
- ☐ A Small Entity Statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.

02/07/2011 MBELETE1 00000003 000380 10630227
01 FC:1251 130.00 DA

The claims fee has been calculated as shown below:

					SMALL ENTITY		OTHER THAN SMALL ENTITY			
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDIT. FEE	OR	RATE	ADDIT. FEE	
TOTAL	86	MINUS	* 89	0	X \$26	\$		X \$52	\$ 0	
INDEP	4	MINUS	** 5	0	X \$110	\$		X \$220	\$ 0	
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+	\$195	\$	+	\$390	\$
					TOTAL = \$ 0			TOTAL = \$ 0		

* not fewer than 20
 ** not fewer than 3

The Application Size Fee has been calculated as shown below:

(Effective for cases filed on or after December 8, 2004)

Actual Sheets (Including current amendment)	Highest No. of Sheets Paid For (At least 100)	No. of Additional Units Required (Increments of 50 sheets)	SMALL ENTITY		OTHER THAN SMALL ENTITY		Payment Sufficient for up to [] Sheets
			Rate	Total Amount Owed	Rate	Total Amount Owed	
			X \$135	\$[]	X \$270	\$[]	

Petition for Extension of Time

- ☒ Applicant hereby petitions to extend the time to respond to the Office Action dated December 2, 2010 for one month from January 2, 2011 to February 2, 2011. The appropriate fee is set forth below.
- ☐ [For action-specific language in an extension of time, select the appropriate option from the Firm Templates]

Please charge Deposit Account No. 08-0380 for the following fees:

<input checked="" type="checkbox"/>	Petition for one month Extension of Time	\$ 130.00
<input type="checkbox"/>	Claims Fee	\$ _____
<input type="checkbox"/>	Application Size Fee	\$ _____
<input type="checkbox"/>	Other Fees:	\$ _____
		\$ _____
		\$ _____
TOTAL:		\$ 130.00

A check is enclosed in payment of the following fees:

<input type="checkbox"/>	Petition for [] month Extension of Time	\$ _____
<input type="checkbox"/>	Claims Fee	\$ _____
<input type="checkbox"/>	Application Size Fee	\$ _____
<input type="checkbox"/>	Other Fees:	\$ _____
		\$ _____
		\$ _____
TOTAL:		\$ _____

☒ Please charge any deficiency or credit any overpayment in the fees that may be due in this matter to Deposit Account No. 08-0380.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

By 

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Dated: 02/02/11